



Transitional Living Specialist Training NYTD Survey

Survey Login



Youth Outcome Survey

NYTD
National Youth in Transition Database

To continue, please enter your User ID and Password:

User ID:

Password:

If you are a first time user or have forgotten your password, select 'Request Password'.

***** UNAUTHORIZED ACCESS IS A VIOLATION OF [STATUTE 45-6-311 MCA](#). *****

If you are having problems using this program, please email [Child and Family Services](#) or call (406) 444-0457.

- User ID = first initial of first name + last name (up to 8 characters)
JOHN BLACK = JBLACK
- If duplicates, system will add number to end
JACK BLACK = JBLACK2
- Worker will receive email to check alerts for User ID
- Not case specific

Survey Login



The image shows a login screen for the Youth Outcome Survey. At the top left, the text 'Youth Outcome Survey' is displayed in a blue, sans-serif font. To the right of this text is the NYTD logo, which consists of the letters 'NYTD' in a stylized blue font with a green and yellow graphic element, and the text 'National Youth in Transition Database' in a smaller, orange font below it. Below the header, there is a light blue rectangular box containing the login form. Inside this box, the text 'To continue, please enter your User ID and Password:' is centered. Below this text are two input fields: 'User ID:' and 'Password:'. To the right of the 'Password:' field are two buttons: 'Logon' and 'Clear'. Below these fields and buttons, there is a line of text: 'If you are a first time user or have forgotten your password, select 'Request Password'.' Below this text is a button labeled 'Request Password'. At the bottom of the login box, there is a line of text: '***** UNAUTHORIZED ACCESS IS A VIOLATION OF STATUTE 45-6-311 MCA. *****'. Below this text is another line of text: 'If you are having problems using this program, please email [Child and Family Services](#) or call (406) 444-0457.'

- No password for the first login
- Enter User ID – click Request Password button
- Forgotten password? – click Request Password button
- Department email and phone number

Survey Password Change



Change Password

NYTD
National Youth in Transition Database

To continue, please enter your Social Security Number and Date of Birth:

User ID: NYTDTST4

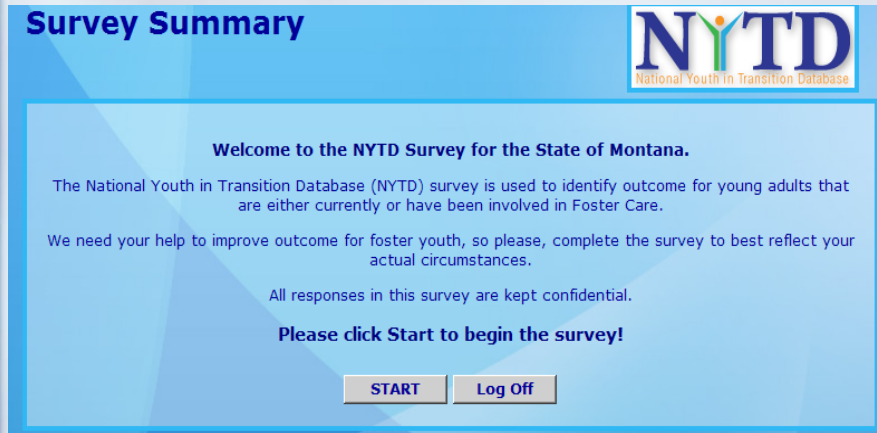
Social Security Number: - -

Date of Birth:

* A new password will be displayed after data entered has been validated.
* After displaying the new password you will automatically be logged in.

- Password can be changed any time on non-frozen surveys
- Must enter SSN and DOB
- Click Generate Password button
- New password is random 8 character mix of letters and numbers

Survey Summary



The screenshot shows a web page titled "Survey Summary" for the "National Youth in Transition Database (NYTD)". The page has a blue header with the title and the NYTD logo. The main content area is white with a blue border. It contains a welcome message, a brief description of the survey's purpose, a request for help, a confidentiality statement, and a prompt to click "Start". At the bottom, there are two buttons: "START" and "Log Off".

Survey Summary

NYTD
National Youth in Transition Database

Welcome to the NYTD Survey for the State of Montana.

The National Youth in Transition Database (NYTD) survey is used to identify outcome for young adults that are either currently or have been involved in Foster Care.

We need your help to improve outcome for foster youth, so please, complete the survey to best reflect your actual circumstances.

All responses in this survey are kept confidential.

Please click Start to begin the survey!

START **Log Off**

- Welcome
- Purpose
- Request for Assistance
- Confidentiality
- Click START to begin

Survey Time Limit

Participant Survey

Please complete the survey within a half-hour.

Time remaining: **29:09**



- 30 minutes to complete survey
- System will automatically log out
- ANSWERS NOT SAVED!

Survey Question #1 and Help

1. Currently are you employed full-time?

- ☐ Yes
- ☐ No
- ☐ Declined

Current full-time employment

“Full-time” means working at least 35 hours per week at one or multiple jobs.

[close this window](#)

Survey Question #2 and Help

2. Currently are you employed part-time?

- ☐ Yes
- ☐ No
- ☒ Declined

Current part-time employment

“Part-time” means working at least 1–34 hours per week at one or multiple jobs.

[close this window](#)

Survey Question #3 and Help

3. In the past year, did you complete an apprenticeship, internship, or other on-the-job training, either paid or unpaid?

- ☐ Yes
- ☐ No
- ☒ Declined

Employment-related skills

This means apprenticeships, internships, or other on-the-job trainings, either paid or unpaid, that helped the youth acquire employment-related skills (which can include specific trade skills such as carpentry or auto mechanics, or office skills such as word processing or use of office equipment).

[close this window](#)

Survey Question #4 and Help

4. Currently are you receiving social security payments (Supplemental Security Income (SSI), Social Security Disability Insurance (SSDI), or dependents' payments)?

- ☐ Yes
- ☐ No
- ☒ Declined

Social Security

These are payments from the government to meet basic needs for food, clothing, and shelter of a person with a disability. A youth may be receiving these payments because of a parent or guardian's disability, rather than his/her own.

[close this window](#)

Survey Question #5 and Help

5. Currently are you using a scholarship, grant, stipend, student loan, voucher, or other type of educational financial aid to cover any educational expenses?

- ☐ Yes
- ☐ No
- ☒ Declined

Educational Aid

Scholarships, grants, and stipends are funds awarded for spending on expenses related to gaining an education. “Student loan” means a government-guaranteed, low-interest loan for students in post-secondary education.

[close this window](#)

Survey Question #6 and Help

6. Currently are you receiving any periodic and/or significant financial resources or support from another source not previously indicated and excluding paid employment?

- ☐ Yes
- ☐ No
- ☒ Declined

Other financial support

This means periodic and/or significant financial support from a spouse or family member (biological, foster or adoptive), child support that the youth receives or funds from a legal settlement. This does not include occasional gifts, such as birthday or graduation checks or small donations of food or personal incidentals, child care subsidies, child support for a youth's child or other financial help that does not benefit the youth directly in supporting himself or herself.

Survey Question #7 and Help

7. What is the highest educational degree or certification that you have received?

- ☐ High school diploma/GED
- ☐ Vocational certificate
- ☐ Vocational license
- ☐ Associate's degree (e.g., A.A.)
- ☐ Bachelor's degree (e.g., B.A. or B.S.)
- ☐ Higher degree
- ☐ None of the above
- ☒ Declined

“Vocational certificate” means a document stating that a person has received education or training that qualifies him or her for a particular job, e.g., auto mechanics or cosmetology. “Vocational license” means a document that indicates that the State or local government recognizes an individual as a qualified professional in a particular trade or business. An Associate’s degree is generally a two-year degree from a community college, and a Bachelor’s degree is a four-year degree from a college or university.

“Higher degree” indicates a graduate degree, such as a Masters or Doctorate degree. “None of the above” means that the youth has not received any of the above educational certifications.

Survey Question #8 and Help

8. Currently are you enrolled in and attending high school, GED classes, post-high school vocational training, or college?

- ☐ Yes
- ☐ No
- ☒ Declined

Current enrollment and attendance

This means both enrolled in and attending high school, GED classes, or postsecondary vocational training or college. A youth is still considered enrolled in and attending school if the youth would otherwise be enrolled in and attending a school that is currently out of session (e.g., Spring break, summer vacation, etc.).

[close this window](#)

Survey Question #9 and Help

9. Currently is there at least one adult in your life, other than your caseworker, to whom you can go for advice or emotional support?

- ☐ Yes
- ☐ No
- ☒ Declined

Connection to adult

This refers to an adult who the youth can go to for advice or guidance when there is a decision to make or a problem to solve, or for companionship to share personal achievements. This can include, but is not limited to, adult relatives, parents or foster parents. The definition excludes spouses, partners, boyfriends or girlfriends and current caseworkers. The adult must be easily accessible to the youth, either by telephone or in person.

Survey Question #10 and Help

10. Have you ever been homeless?

- ☐ Yes
- ☐ No
- ☒ Declined

Homelessness

“Homeless” means that the youth had no regular or adequate place to live. This includes living in a car, or on the street, or staying in a homeless or other temporary shelter.

[close this window](#)

Survey Question #11 and Help

11. Have you ever referred yourself or has someone else referred you for an alcohol or drug abuse assessment or counseling?

- ☐ Yes
- ☐ No
- ☒ Declined

Substance abuse referral

This includes either self-referring or being referred by a social worker, school staff, physician, mental health worker, foster parent, or other adult for an alcohol or drug abuse assessment or counseling. Alcohol or drug abuse assessment is a process designed to determine if someone has a problem with alcohol or drug use.

[close this window](#)

Survey Question #12 and Help

12. Have you ever been confined in a jail, prison, correctional facility, or juvenile or community detention facility, in connection with allegedly committing a crime?

- ☐ Yes
- ☐ No
- ☒ Declined

Incarceration

This means that the youth was confined in a jail, prison, correctional facility, or juvenile or community detention facility in connection with a crime (misdemeanor or felony) allegedly committed by the youth.

[close this window](#)

Survey Question #13 and Help

13. Have you ever given birth or fathered any children that were born?

- ☐ Yes
- ☐ No
- ☒ Declined

Children

This means giving birth to or fathering at least one child that was born. If males do not know, answer "No."

[close this window](#)

Survey Question #14 and Help

14. If you responded yes to the previous question, were you married to the child's other parent at the time each child was born?

- ☐ Yes
- ☐ No
- ☒ Declined

Marriage at Child's Birth

This means that when every child was born the youth was married to the other parent of the child.

[close this window](#)

Survey Question #15 and Help

15. Currently are you on Medicaid?

- ☐ Yes
- ☐ No
- ☐ Don't know
- ☒ Declined

Medicaid

Medicaid (or the State medical assistance program) is a health insurance program funded by the government.

[close this window](#)

Survey Question #16 and Help

16. **Currently do you have health insurance, other than Medicaid?**

- ☐ Yes
- ☐ No
- ☐ Don't know
- ☒ Declined

Other Health insurance Coverage

“Health insurance” means having a third party pay for all or part of health care. Youth might have health insurance such as group coverage offered by employers or schools, or individual policies that cover medical and/or mental health care and/or prescription drugs, or youth might be covered under parents’ insurance. This also could include access to free health care through a college, Indian Tribe, or other source.

Survey Question #17 and Help

17. Does your health insurance include coverage for medical services?

- ☐ Yes
- ☐ No
- ☐ Don't know
- ☒ Declined

Health insurance type—medical

This means that the youth's health insurance covers at least some medical services or procedures. This question is for only those youth who responded "yes" to having health insurance.

[close this window](#)

Survey Question #18 and Help

18. Does your health insurance include coverage for mental health services?

- ☐ Yes
- ☐ No
- ☐ Don't know
- ☒ Declined

Health insurance type—mental health

This means that the youth's health insurance covers at least some mental health services. This question is for only those youth who responded "yes" to having health insurance with medical coverage.

[close this window](#)

Survey Question #19 and Help

19. Does your health insurance include coverage for prescription drugs?

- ☐ Yes
- ☐ No
- ☐ Don't know
- ☒ Declined

Health insurance type—prescription drugs

This means that the youth's health insurance covers at least some prescription drugs. This question is for only those youth who responded "yes" to having health insurance with medical coverage.

[close this window](#)

Survey Question #20 and Help

20. Currently are you receiving ongoing welfare payments from the government to support your basic needs?

- ☐ Yes
- ☐ No
- ☒ Declined

Public financial assistance

This refers to ongoing welfare payments from the government to support your basic needs. Do not consider payments or subsidies for specific purposes, such as unemployment insurance, child care subsidies, education assistance, food stamps or housing assistance in this category.

[close this window](#)

This question will only display for 19 and 21 year olds.

Survey Question #21 and Help

21. Currently are you receiving public food assistance?

- ☐ Yes
- ☐ No
- ☒ Declined

Public food assistance

Public food assistance includes food stamps, which are government-issued coupons or debit cards that recipients can use to buy eligible food at authorized stores. Public food assistance also includes assistance from the Women, Infants and Children (WIC) program.

[close this window](#)

This question will only display for 19 and 21 year olds.

Survey Question #22

22. Currently are you receiving any sort of housing assistance from the government, such as living in public housing or receiving a housing voucher?

- ☐ Yes
- ☐ No
- ☒ Declined

Public housing assistance

Public housing is rental housing provided by the government to keep rents affordable for eligible individuals and families, and a housing voucher allows participants to choose their own housing while the government pays part of the housing costs. This does not include payments from the child welfare agency for room and board payments.

[close this window](#)

This question will only display for 19 and 21 year olds.

When finished, CLICK



Complete

Survey Complete

Survey Completed



Your progress has been marked as complete! The information you provided in this survey is invaluable, thank you! We would like to track your outcomes after aging out of Foster Care, so your Transitional Living Specialist will be contacting you again around your 19th and 21st birthdays in order for you to retake this survey.

This survey will remain accessible until 04/24/2010.

Your information on file is:

One Nytdtest
123 Place To Be
Helena, MT 59602

Please enter any updated contact information:

Notice - Unlike the Survey, any contact information or comments entered will be shared with Child and Family Services.

Address Line1:

Address Line2:

City:

State:

Zip Code: -

Phone: - -

Email:

- Thank you and reminders
- Current CAPS address
- Ability to update address (does NOT update CAPS)

Survey Complete

Enter other contact information and/or provide feedback to CFSD:

Free form comment text. Testing lines. Further line testing. Have a great day.

(Maximum characters: 500)
You have 500 characters remaining.

[Submit and Log Out](#)

Foster Care resources, fraternal organizations and other helpful sources:

- [Montana's Official State Website](#)

- Ability to add general comments (500 characters maximum)
- Click Submit and Log Out
- List of available resources